



CANDIDATE'S STATEMENT OF ORGANIZATION AND
DESIGNATION OF PRINCIPAL COMMITTEE OR EXPLORATORY COMMITTEE
State Form 4604 (R10/10-01)
Indiana Election Commission (IC 3-9-1-3; IC 3-9-1-4; IC 3-9-1-5)

(CFA-1)

PLEASE TYPE OR PRINT LEGIBLY IN BLACK INK. SEE INSTRUCTIONS ON REVERSE SIDE.

FILE NUMBER

1. IS THIS AN AMENDMENT? ☐ No ☐ Yes If Yes, please enter the file number in this box →

05-029

SECTION A. CANDIDATE INFORMATION: Fill in all applicable boxes as fully and accurately as possible.

2. Last Name Rehme	First Name Clark	Middle Name Gavin	Nickname None	3. Type of Committee (Check one) <input type="checkbox"/> Candidate's Principal Committee <input checked="" type="checkbox"/> Exploratory Committee
4. Mailing Address 12664 Shorevista Drive		5. FAX (Optional) None		6. E-mail address (Optional) None
7. City Indpls.	State IN	Zip Code 46236	8. County Marion	9. Telephone (Day) (317) 513-0324
				10. Telephone (Evening) (317) 823-0324
11. Party Affiliation <input type="checkbox"/> Democratic <input type="checkbox"/> Libertarian <input checked="" type="checkbox"/> Republican <input type="checkbox"/> Other			12. Office Sought (Include district number, if any. Not required for an exploratory committee.)	

SECTION B. COMMITTEE INFORMATION: Fill in all applicable boxes as fully and accurately as possible.

13. Full Name of Committee (Do not abbreviate) <input type="checkbox"/> Check if this is a new name Committee to Elect Clark Rehme				
14. Mailing Address <input type="checkbox"/> Check if this is a new address 12664 Shorevista Drive		15. FAX (Optional) None		16. E-mail address (Optional) None
17. City Indpls.	State IN	Zip Code 46236	18. County Marion	19. Telephone (317) 513-0324
			20. Committee organization date (MM-DD-YY) 11-16-05	
21. Chairperson's Full Name <input checked="" type="checkbox"/> Designate Candidate as Chairperson <input type="checkbox"/> Check if this is a new chairperson				
22. Mailing Address <input type="checkbox"/> Check if this is a new address		23. FAX (Optional)		24. E-mail address (Optional)
25. City	State	Zip Code	26. County	27. Telephone (Day)
29. Bank or Other Depositories (List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.) First National Bank & Trust				
30. Exploratory Committee (Give brief statement explaining purpose of an exploratory committee only.) Determine if Clark Rehme is a feasible candidate.			31. Salaries and Reimbursements (Will the committee pay the candidate a salary or reimbursement for lost wages? If Yes, attach a copy of the contract.) <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

SECTION C. APPOINTMENT OF TREASURER (IC 3-9-1-14)

32. I, as Chairperson of the foregoing committee, appoint the following person as Treasurer of the Committee.		Person Appointed Treasurer Betty Glosbrenner	Signature of the Committee Chairperson Clark G. Rehme	
33. Treasurer's Full Name <input type="checkbox"/> Designate Candidate as Treasurer <input type="checkbox"/> Check if this is a new treasurer Betty Jeanne Glosbrenner				
34. Mailing Address <input type="checkbox"/> Check if this is a new address 10920 E 77th St		35. FAX (Optional) None		36. E-mail address (Optional) None
37. City Indpls	State IN	Zip Code 46236	38. County Marion	39. Telephone (Day) (317) 372-3278
40. Telephone (Evening) (317) 823-4394				

SECTION D. ACCEPTANCE OF APPOINTMENT (IC 3-9-1-15)

41. I give notice that I accept the duties and responsibilities of Treasurer of this Committee. I am not the chairperson of a campaign finance committee (except as permitted for a candidate committee under IC 3-9-1-7).	Signature of Person Accepting Appointment Betty J. Glosbrenner
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SECTION E. CERTIFICATION OF STATEMENT

We certify as the candidate and the duly appointed Chairperson of the Committee and that we have examined this statement. To the best of our knowledge and belief it is true, correct and complete.		
42. Typed or printed name of Chairperson Clark G. Rehme	Signature of Chairperson Clark G. Rehme	Date (MM-DD-YY) 11/17/05
43. Typed or printed name of Candidate Clark G. Rehme	Signature of Candidate Clark G. Rehme	Date (MM-DD-YY) 11/17/05

Warning: State law requires that any change in this information be reported within 10 days of the change (IC 3-9-1-10). A person who knowingly files a fraudulent report commits a Class D felony (IC 3-14-1-13). A person who fails to file a complete or accurate report as required by the Indiana Campaign Finance Law commits a Class B misdemeanor (IC 3-14-1-14), and may be subject to civil penalties (IC 3-9-4-16, IC 3-9-4-17, and IC 3-9-4-18).

FOR OFFICE USE ONLY

05 NOV 17 AM 11:45

DAVID L. HARTMAN
MARION COUNTY CLERK